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|---|--|---|---|---|--|--|
| | United States Environmental Protection Agency Washington, DC 20460 | 1. EPA IA Identification Nun DW-75-958703 | | 2. Fundin | g Location on EPA R9 | |
| Acendo assista | Interagency Agreement Amendment | 3. Other Agency IA ID Numb PH 14-U62 | oer (if know | (n) 4. Awardi | • | |
| PANTE PROTECTOR | Part 1 - General Information | 5. Type of Action Decrease | se | 6. IA Spec | | |
| | | | | schaub iol | hn@ena gov | |
| 7. Name and Address of EPA Organization US Environmental Protection Agency IASSC West 1200 Sixth Avenue, Suite 900, OMP-173 | | Indian Health Service Phoenix Area | | | | |
| | | D | | | | |
| Seattle, WA 98101 | 40 BETC: DISP | Phoenix, AZ 85004 | | | | |
| 9. DUNS: 029128894 13. Project Title and Description | 10. BETC: DISB | 11. DUNS: 364268581 | 12 | . BETC: COLL | | |
| portion of the well transmission in This decrease amendment is to onotification of any discrepancies | disinfection facility, conducting road excavation and repairs, and constructing a Upper Mishongnovi villages. Ig funds. If EPA does not receive either a signed acceptance or written ervice Certified Mail Return Receipt date (PS Form 3811), these funds will be dout. The decrease amount is \$813,858.13. 15. Other Agency Project Officer (Name, Address, Telephone) Ken Fitzgerald Phoenix Area, Eastern District / Two Renaissance Square, 40 North Central Avenue Phoenix, AZ 85004 928-364-5072 E-Mail: Ken.Fitzgerald@ihs.gov FAX: 928-537-3060 17. Budget Period: 11/01/2014 to 12/30/2019 | | | | | |
| 14. EPA Project Officer (Name, Karly Ho 75 Hawthorne Street (WTR-3-2) San Francisco, CA 94105 415-972-3458 E-Mail: ho.karly@epa.gov FAX: 415-947-3537 16. Project Period: 11/01/2014 18. Scope of Work (See Attach | Address, Telephone Number) to 12/30/2019 ment) | 15. Other Agency Project Of Ken Fitzgerald Phoenix Area, Eastern District Avenue Phoenix, AZ 85004 928-364-5072 E-Mail: Ken.Fitzgerald@ihs.g FAX: 928-537-3060 | fficer (Name t / Two Rena | e , Address, Tele p aissance Square, | • | |
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| 14. EPA Project Officer (Name, Karly Ho 75 Hawthorne Street (WTR-3-2) San Francisco, CA 94105 415-972-3458 E-Mail: ho.karly@epa.gov FAX: 415-947-3537 16. Project Period: 11/01/2014 18. Scope of Work (See Attach Scope of Work remains the same 19. Employer/Tax ID No. 52085 22. Statutory Authority for Trais Safe Drinking Water Act: Sec. 14 24. Revise Reimbursable Fund Revise Reimbursable (in-house Direct Fund Cite (contractor) Total Funds 25. EPA Amount 26. EPA In-Kind Amount 27. Other Agency Amount 28. Other Agency In-Kind Amo 29. Total Project Cost 30. Fiscal Information | Address, Telephone Number) to 12/30/2019 ment) 9 2695 20. CAGE No: 347A4 nsfer of Funds and Interagency Agreeme 50(b) s and Direct Fund Cites (only complete i Previous Funding e) Previous Amount \$985,000.6 unt \$0.6 \$985,000.6 | 15. Other Agency Project O Ken Fitzgerald Phoenix Area, Eastern District Avenue Phoenix, AZ 85004 928-364-5072 E-Mail: Ken.Fitzgerald@ihs.g FAX: 928-537-3060 17. Budget Period: 11/01/20 21. All nt applicable) Amount This Action 0 \$-813 0 0 0 \$-813 | fficer (Name at / Two Rena gov 14 to 12/30 LC: 68-01-07 | e, Address, Telepaissance Square, //2019 //27 //23. Other Federal Amende | Agency Type I Agency I Ag | |
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EPA Form 1610-1 (Rev. 11-09). Previous editions are obsolete.

EPA IAG Identification No. DW-75-95870301 - 3 Page 2

| | EPA IAG Identification Number | | | | | | | |
|---|--|-------------------------------|---------------------------------------|--|--|--|--|--|
| | | | | DW-75-95870301 - 3 | | | | |
| 31. Budget Categories | Itemization of All Previous Actions | Itemization of This Action | In-Kind Itemization of This Action | Itemization of Total Project Cost to Date | | | | |
| (a) Personnel | \$47,876.00 | \$-13,858.13 | | \$34,017.87 | | | | |
| (b) Fringe Benefits | \$0.00 | | | \$0.00 | | | | |
| (c) Travel | \$0.00 | | | \$0.00 | | | | |
| (d) Equipment | \$0.00 | | | \$0.00 | | | | |
| (e) Supplies | \$0.00 | | | \$0.00 | | | | |
| (f) Procurement / Assistance | \$817,433.00 | \$-750,000.00 | | \$67,433.00 | | | | |
| (g) Construction | \$0.00 | | | \$0.00 | | | | |
| (h) Other | \$119,691.00 | \$-50,000.00 | | \$69,691.00 | | | | |
| (i) Total Direct Charges | \$985,000.00 | \$-813,858.13 | \$0.00 | \$171,141.87 | | | | |
| (j) Indirect Costs: | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | | |
| Charged - Amount Rate: % Base: \$ Not Charged: Funds-Out: Not charged by Other Agency Estimate by other Agency Amount \$ | | | | | | | | |
| (k) Total (EPA Share 100.00 %) (Other Agency Share 0.00 %) | \$985,000.00 | \$-813,858.13 | \$0.00 | \$171,141.87 | | | | |
| 32. How was the IDC Base calculate | d? | | | | | | | |
| 33. Is equipment authorized to be furnished by EPA or leased, purchased, or rented with EPA funds? Yes No (Identify all equipment costing \$1,000 or more) Equipment costs are included under the Procurement/Assistance cost category of the approved Budget. See attached Scope of Work and paragraph four of I. Administrative Terms and Conditions for further information. | | | | | | | | |
| 34. Are any of these funds being us | | agreements? | Yes No | | | | | |
| Type of Procure/Assistance Agreem | | \ | dou This Dusie of | Description de des CDA (Stancour) | | | | |
| Contractor/Recipient Name (if known) | Total Procure// | Assistance Amount Und | <u>-</u> | Percent Funded by EPA (if known) | | | | |
| PL 86-121 MOA w/ Hopi | | | 67433 Total \$ 67,433.00 | 100 | | | | |
| Part III - Funding Methods and Billing Instructions | | | | | | | | |
| 35. | (Note: EPA Agend | cy Location Code (| ALC) - 68010727) | | | | | |
| Disbursement Agreement | Request for repayment Office, Cincinnati, OH 4 | | itemized on SF 1080 and | submitted to the Financial Management | | | | |
| Repayment | Monthly | Quarterly | Upon Com | oletion of Work | | | | |
| Advance | Only available for use by Federal agencies on working capital fund or with appropriate justification of need for this type of payment method. Unexpended funds at completion of work will be returned to EPA. Quarterly cost reports will be forwarded to the Financial Management Center, EPA, Cincinnati, OH 45268-7002. | | | | | | | |
| Allocation Transfer-Out | Used to transfer obligational authority or transfer of function between Federal agencies. Must receive prior approval by the Office of Comptroller, Budget Division, Budget Formulation and Control Branch, EPA Hdqtrs. Forward appropriate reports to the Financial Reports and Analysis Branch, Financial Management Division, PM-226F, EPA, Washington, DC 20460. | | | | | | | |
| 36. Reimbursement Agreement Allocation Transfer-In | Repayment | Advance | | | | | | |
| Other Agency's Billing Address (incl | ude ALC or Station Symb | ol Number) | Other Agency's Billing I | nstructions and Frequency | | | | |
| | | | Other Agency TAS | | | | | |
| EPA Form 1610-1 (Rev. 11-09). Previous edi | itions are obsolete | | | | | | | |

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Part IV - Acceptance Conditions EPA Identification Number DW-75-95870301 - 3

37. Terms and Conditions, when included, are located at the end of the 1610-1, or as an attachment.

Part V - Offer and Acceptance

Note: A) For Fund-out actions, the agreement/amendment must be signed by the other agency official in duplicate and one original returned to the Grants and IA Management Division for Headquarters agreements or to the appropriate EPA Regional IA administration office within 3 calendar weeks after receipt or within any extension of time that may be granted by EPA. The agreement/amendment must be forwarded to the address cited in item 29 after acceptance signature.

Failure to return the properly executed document within the prescribed time may result in the withdrawal of offer by EPA. Any change to the agreement/amendment by the other agency after the document is signed by the EPA Award Official, which the Award Official determines to materially alter the agreement/amendment, shall void the agreement/amendment.

B) For Funds-In actions, the other agency will initiate the action and forward two original agreements/amendments to the appropriate EPA program office for signature. The agreements/amendments will then be forwarded to the appropriate EPA IA administration office for signature on behalf of the EPA. EPA will return one original copy after acceptance returned to the other agency after acceptance.

| EPA IA Administration Office (for administrative assistance) | | EPA Program Office (for technical assistance) | EPA Program Office (for technical assistance) | | |
|---|---------------------------|--|---|--|--|
| 38. Organization/Address | | 39. Organization/Address | 39. Organization/Address | | |
| U.S. Environmental Protection Agency IASSC West 1200 Sixth Avenue, Suite 900, OMP-173 Seattle, WA 98101 | | US Environmental Protection Agency R9 - Region 9 75 Hawthorne Street San Francisco, CA 94105 | | | |
| | Award Official on Behal | f of the Environment Protection Agency | | | |
| 40. Digital signature applied by EPA Award Official Melissa Wise - Chief - Grants and Interagency Agreements Branch | | | Date | | |
| | | | 05/07/2020 | | |
| | Authorizing Offic | ial on Behalf of the Other Agency | | | |
| 41. Signature | ture Typed Name and Title | | Date | | |
| Dr. Roselyn Tso, Area Director | | | | | |

EPA Form 1610-1 (Rev. 11-09) Previous editions are obsolete.